B1 (Official	Form 1)(1/		United	States	Donly	tox	Соли	<u>.</u>				
	United States Bankruptcy ( Southern District of Ohio										Voluntary	Petition
	Name of Debtor (if individual, enter Last, First, Middle):  Baker, Michael Ray								Name of Joint Debtor (Spouse) (Last, First, Middle):  Baker, Lori Kathryn			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							(incl	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):  FKA Lori K. Covert				
Last four di (if more than	one, state all)	Sec. or Indi	vidual-Taxp	ayer I.D. (	ITIN) No./0	Complete E	(if me	four digits of ore than one, s	state all)	r Individual-7	Гахрауег I.D. (ITIN) N	Io./Complete EIN
	e Street	or (No. and	Street, City,	and State)	:	ZIP Code	10 C	t Address of 00 Pike St incinnati,	reet	r (No. and Str	reet, City, and State):	ZIP Code
County of I	Residence or	of the Princ	cipal Place o	f Business		45215		nty of Reside	ence or of the	Principal Pla	ace of Business:	45215
Hamilto			1				Ha	amilton				
Mailing Ad	ldress of Del	otor (if diffe	rent from str	eet addres	ss):		Mail	ing Address	of Joint Deb	tor (if differer	nt from street address)	:
						ZIP Code						ZIP Code
Location of (if different	f Principal A t from street	ssets of Bus address abo	siness Debtorove):	<u> </u>								1
Type of Debtor  (Form of Organization)  (Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP)  Partnership  Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Tax-Exempt Entity  (Check one box)  Health Care Business  (Check one box)  Health Care Business  Single Asset Real Estate as de in 11 U.S.C. § 101 (51B)  Railroad  Stockbroker  Commodity Broker  Clearing Bank  Other  Tax-Exempt Entity  (Check box, if applicable)  Debtor is a tax-exempt organiunder Title 26 of the United S  Code (the Internal Revenue Co			e) anization d States	defined "incuri	the I ter 7 ter 9 ter 11 ter 12 ter 13 ter 13 ter 13 ter 14 ter 15 ter 15 ter 16 ter 17 ter 17 ter 18 ter 1	Petition is Fi	busin	Recognition eding				
Filing Fee (Check one box)  ■ Full Filing Fee attached  □ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					Chec	Debtor is k if: Debtor's to insider k all applica A plan is Acceptan	a small busin not a small b aggregate not s or affiliates; ble boxes: being filed w ces of the pla	ncontingent li are less than with this petition were solici	s defined in 11 U.S.C. or as defined in 11 U.S iquidated debts (excluda \$2,190,000.	.C. § 101(51D).  ding debts owed  ne or more		
■ Debtor o	estimates tha	at funds will at, after any	ation  I be available exempt proper for distribut	erty is ex	cluded and	administrat					S SPACE IS FOR COURT	
Estimated N	Number of C 50- 99	reditors  100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A  \$0 to \$50,000	Assets \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,00 to \$500 million	11 \$500,000,001 to \$1 billion				
Estimated L  \$0 to \$50,000	Liabilities  \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,00 to \$500 million	5500,000,001 to \$1 billion				

B1 (Official Form 1)(1/08) Page 2

Voluntary	Petition	Name of Debtor(s):  Baker, Michael Ray			
(This page mus	t be completed and filed in every case)	Baker, Lori Kathryn			
( I G	All Prior Bankruptcy Cases Filed Within Last		litional sheet)		
Location	- · ·	Case Number:	Date Filed:		
Where Filed:	Eastern District of Kentucky	04-23208	12/29/04		
Location Where Filed:		Case Number:	Date Filed:		
Pen	ding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)		
Name of Debto - None -	r:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A	Ext (To be completed if debtor is an individual	nibit B whose debts are primarily consumer debts.)		
forms 10K an pursuant to Se	eted if debtor is required to file periodic reports (e.g., d 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)	12, or 13 of title 11, United States Cod	in the foregoing petition, declare that I she] may proceed under chapter 7, 11, e, and have explained the relief available fy that I delivered to the debtor the notice		
☐ Exhibit A	A is attached and made a part of this petition.	$\mathbf{X}$ /s/ Neal J. Weill, Esq.	December 21, 2009		
		Signature of Attorney for Debtor(s)  Neal J. Weill, Esq.	(Date)		
		iveai J. Welli, Esq.			
	own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	ibit C pose a threat of imminent and identifiable  ibit D	harm to public health or safety?		
Exhibit I	eted by every individual debtor. If a joint petition is filed, each completed and signed by the debtor is attached and made at petition:  Delta also completed and signed by the joint debtor is attached at	a part of this petition.	separate Extrior D.)		
	Information Regardin	g the Debtor - Venue			
_	(Check any ap	-			
	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for				
	There is a bankruptcy case concerning debtor's affiliate, ge				
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defendance interests of the parties will be served	t in an action or d in regard to the relief		
	Certification by a Debtor Who Reside (Check all appl		y		
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checked, o	complete the following.)		
	(Name of landlord that obtained judgment)				
	(Address of landlard)				
	(Address of landlord)  Debtor claims that under applicable nonbankruptcy law, the				
	the entire monetary default that gave rise to the judgment f Debtor has included in this petition the deposit with the co after the filing of the petition.				
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(l)).			

B1 (Official Form 1)(1/08)

Page 3

# **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Michael Ray Baker

Signature of Debtor Michael Ray Baker

### X /s/ Lori Kathryn Baker

Signature of Joint Debtor Lori Kathryn Baker

Telephone Number (If not represented by attorney)

#### December 21, 2009

Date

### Signature of Attorney\*

#### X /s/ Neal J. Weill, Esq.

Signature of Attorney for Debtor(s)

#### Neal J. Weill, Esq. - Ohio Bar No. 0016575

Printed Name of Attorney for Debtor(s)

#### Neal J. Weill, Attorney at Law, LLC

Firm Name

250 East Fifth Street Suite 1526 Cincinnati, OH 45202

Address

### Email: nealjweill@aol.com

### 513.878.2674 Fax: 513.878.2675

Telephone Number

# December 21, 2009

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Baker, Michael Ray Baker, Lori Kathryn

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

.\_

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Southern District of Ohio

Michael Ray Baker In re Lori Kathryn Baker		Case No.	
	Debtor(s)	Chapter	13
EXHIBIT D - INDIVIDUAL CREDIT	DEBTOR'S STATEMENT COUNSELING REQUIRE		ANCE WITH
Warning: You must be able to che counseling listed below. If you cannot do can dismiss any case you do file. If that I creditors will be able to resume collection another bankruptcy case later, you may extra steps to stop creditors' collection a	o so, you are not eligible to f happens, you will lose whate on activities against you. If y be required to pay a second	ile a bankrup ever filing fee our case is dis	tcy case, and the court you paid, and your missed and you file
Every individual debtor must file the and file a separate Exhibit D. Check one of			-
■ 1. Within the 180 days <b>before th</b> counseling agency approved by the United opportunities for available credit counseling a certificate from the agency describing the of any debt repayment plan developed through	States trustee or bankruptcy and assisted me in performing services provided to me. Atta	administrator tl ing a related bu	nat outlined the idget analysis, and I have
□ 2. Within the 180 days <b>before th</b> counseling agency approved by the United opportunities for available credit counseling not have a certificate from the agency describing the developed through the agency no later than	States trustee or bankruptcy and and assisted me in performing the services provided to services provided to you and a service provided to you and a ser	administrator thing a related by o me. You mus a copy of any a	nat outlined the adget analysis, but I do at file a copy of a lebt repayment plan
☐ 3. I certify that I requested credit obtain the services during the seven days for	•		•

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case

now. [Summarize exigent circumstances here.]

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]  □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);  □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, through the Internet.);					
☐ Active military duty in a military	combat zone.				
☐ 5. The United States trustee or bankruptc requirement of 11 U.S.C. § 109(h) does not apply in	y administrator has determined that the credit counseling in this district.				
I certify under penalty of perjury that the	e information provided above is true and correct.				
Signature of Debtor:					
Date: December 21,	Michael Ray Baker , 2009				

Certificate Number: 00252-OHS-CC-008263082

# **CERTIFICATE OF COUNSELING**

I CERTIFY that on September 8, 2009	, at	t 8:27 o'clock AM EDT	,
Michael R Baker		received from	
Institute for Financial Literacy, Inc.			,
an agency approved pursuant to 11 U.S.C. §	111 to	provide credit counseling in the	
Southern District of Ohio	, ar	n individual [or group] briefing that con	nplied
with the provisions of 11 U.S.C. §§ 109(h)	and 111.		
A debt repayment plan was not prepared	If a d	debt repayment plan was prepared, a cop	y of
the debt repayment plan is attached to this c	ertificat	te.	
This counseling session was conducted by i	nternet a	and telephone	
Date: September 8, 2009	Ву	/s/Mary Aubele	
	Name	Mary Aubele	
	Title	Credit Counselor	

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Southern District of Ohio

Michael Ray Baker In re Lori Kathryn Baker		Case No.	
	Debtor(s)	Chapter	13
EXHIBIT D - INDIVIDUAL CREDIT	DEBTOR'S STATEMENT COUNSELING REQUIRE		ANCE WITH
Warning: You must be able to che counseling listed below. If you cannot do can dismiss any case you do file. If that I creditors will be able to resume collection another bankruptcy case later, you may extra steps to stop creditors' collection a	o so, you are not eligible to f happens, you will lose whate on activities against you. If y be required to pay a second	ile a bankrup ever filing fee our case is dis	tcy case, and the court you paid, and your missed and you file
Every individual debtor must file the and file a separate Exhibit D. Check one of			-
■ 1. Within the 180 days <b>before th</b> counseling agency approved by the United opportunities for available credit counseling a certificate from the agency describing the of any debt repayment plan developed through	States trustee or bankruptcy and assisted me in performing services provided to me. Atta	administrator tl ing a related bu	nat outlined the idget analysis, and I have
□ 2. Within the 180 days <b>before th</b> counseling agency approved by the United opportunities for available credit counseling not have a certificate from the agency describing the developed through the agency no later than	States trustee or bankruptcy and and assisted me in performing the services provided to services provided to you and a service provided to you and a ser	administrator thing a related but one. You must a copy of any a	nat outlined the adget analysis, but I do at file a copy of a lebt repayment plan
☐ 3. I certify that I requested credit obtain the services during the seven days for	•		•

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case

now. [Summarize exigent circumstances here.]

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]  □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, of through the Internet.); ☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Lori Kathryn Baker Lori Kathryn Baker
Date: December 21, 2009

Certificate Number: 00252-OHS-CC-008263065

# **CERTIFICATE OF COUNSELING**

I CERTIFY that on September 8, 2009	, at	at 8:23 o'clock AM EDT ,
Lori K Baker		received from
Institute for Financial Literacy, Inc.		
an agency approved pursuant to 11 U.S.C. §	111 to	provide credit counseling in the
Southern District of Ohio	, ar	an individual [or group] briefing that complied
with the provisions of 11 U.S.C. §§ 109(h)	and 111.	1.
A debt repayment plan was not prepared	If a d	debt repayment plan was prepared, a copy of
the debt repayment plan is attached to this c	ertificat	ite.
This counseling session was conducted by i	nternet a	and telephone
Date: September 8, 2009	Ву	/s/Mary Aubele
	Name	Mary Aubele
	Title	Credit Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

# United States Bankruptcy Court Southern District of Ohio

In re	Michael Ray Baker,		Case No		
	Lori Kathryn Baker				
•		Debtors	Chapter	13	

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	132,000.00		
B - Personal Property	Yes	4	38,351.49		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		167,264.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		41,304.67	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,983.83
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,473.00
Total Number of Sheets of ALL Schedules		22			
	To	otal Assets	170,351.49		
			Total Liabilities	208,568.67	

Michael Ray Baker,		Case No.	
Lori Kathryn Baker		Case 110.	
D	ebtors	Chapter	13
STATISTICAL SUMMARY OF CERTAIN LIA  f you are an individual debtor whose debts are primarily consumer del case under chapter 7, 11 or 13, you must report all information reque  Check this box if you are an individual debtor whose debts are report any information here.	ots, as defined in § 101(8) sted below.	of the Bankruptcy	Code (11 U.S.C.§ 101(
This information is for statistical purposes only under 28 U.S.C. § Summarize the following types of liabilities, as reported in the Scho			
Type of Liability	Amount		
Domestic Support Obligations (from Schedule E)	0.0	0	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.0	0	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.0	0	
Student Loan Obligations (from Schedule F)	23,133.0	0	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.0	0	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.0	0	
TOTAL	23,133.0	0	
State the following:			
Average Income (from Schedule I, Line 16)	2,983.8	3	
Average Expenses (from Schedule J, Line 18)	2,473.0	0	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	3,481.4	4	
State the following:			
Total from Schedule D, "UNSECURED PORTION, IF ANY" column			27,614.00
Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.0	0	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column			0.00
4. Total from Schedule F			41,304.67
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)			68,918.67

In re	Michael Ray Baker,	Case No.
	Lori Kathryn Baker	
-		Debtors ,

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**SCHEDULE A - REAL PROPERTY** 

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property  Nature of Debtor's Interest in Property  Nature of Debtor's Wife, Joint, or Community  Ourrent Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption  Amount of Secured Claim or Exemption	100 Pike Street	Fee simple	J	132,000.00	149,610.00	
	Description and Location of Property		Wife, Joint, or	Debtor's Interest in Property, without Deducting any Secured	Amount of Secured Claim	

Sub-Total > **132,000.00** (Total of this page)

Total > **132,000.00** 

(Report also on Summary of Schedules)

In re	Michael Ray	Baker,
	Lori Kathryn	Baker

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Location: 100 Pike Street, Cincinnati OH	J	50.00
2.	Checking, savings or other financial	US Bank Checking	J	500.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and	U.S. Bank Savings	J	500.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.	Platinum Community Bank Checking	J	0.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and	Location: 100 Pike Street, Cincinnati OH	J	2,135.00
	computer equipment.	Misc. household goods including:  3 bed room suites (\$400 each) family rooms furniture including couch, love seat and 3 tables (\$200.00) curio cabinet (\$50) 5 televisions (\$200) 2 DVD players (\$25) computer (\$100) printer (\$25) monitor (\$25) dining room set (\$25) aquarium (\$100) patio furniture (\$50) camcorder (\$25) lap top computer (\$75) digital camera (\$25) portable DVD player (\$10)		
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Location: 100 Pike Street, Cincinnati OH Misc CD's and DVD's (\$150) Wolf pictures (\$25) Mirror (\$10) Barry Larkin signed ball and bat (\$100)	J	285.00
		(Tot	Sub-Tot al of this page)	al > 3,470.00

3 continuation sheets attached to the Schedule of Personal Property

In re	Michael Ray	Baker,
	Lori Kathrvn	Baker

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

		N		Unchand	Current Value of
	Type of Property	O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Debtor's Interest in Property, without Deducting any
6.	Wearing apparel.		Location: 100 Pike Street, Cincinnati OH	J	200.00
			Man's and woman's clothing		
7.	Furs and jewelry.		Location: 100 Pike Street, Cincinnati OH	J	350.00
			wedding bands (\$150) diamond earrings (\$100) gold chain (\$25) gold/diamond heart pendant (\$75)		
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		US Bank 401(k) plan (Not property of the estate per U.S. Supreme Court	J	1,500.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			

Sub-Total > 2,050.00 (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re	Michael Ray Baker,
	Lori Kathryn Baker

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E		Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.		Michael Meyer owes back due child support	J	22,656.49
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.				
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	Х			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Lawsuit against Sandra Thornton for medical bills resulting from car accident	J	2,525.00
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and		1997 Chevy Blazer	J	1,450.00
	other vehicles and accessories.		2007 Chevy Impala	J	6,200.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
				Sub-Tot	al > <b>32,831.49</b>
			(Total	l of this page)	JZ,001.70

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

In re	Michael Ray Baker,
	Lori Kathryn Baker

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > **0.00** (Total of this page)

Total > **38,351.49** 

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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Michael Ray Baker, Lori Kathryn Baker

Case No.	

Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled u (Check one box)  11 U.S.C. \$522(b)(2)  11 U.S.C. \$522(b)(3)	nder: Check if debtor clair \$136,875.	ms a homestead exe	emption that exceeds
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property 100 Pike Street Cincinnati, OH 45215	Ohio Rev. Code Ann. § 2329.66(A)(1)	40,400.00	132,000.00
Cash on Hand Location: 100 Pike Street, Cincinnati OH	Ohio Rev. Code Ann. § 2329.66(A)(3)	50.00	50.00
Checking, Savings, or Other Financial Accounts, C		500.00	500.00
US Bank Checking	Ohio Rev. Code Ann. § 2329.66(A)(3)	500.00	500.00
U.S. Bank Savings	Ohio Rev. Code Ann. § 2329.66(A)(3) Ohio Rev. Code Ann. § 2329.66(A)(18)	250.00 250.00	500.00
Household Goods and Furnishings Location: 100 Pike Street, Cincinnati OH Misc. household goods including:	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	2,135.00	2,135.00
3 bed room suites (\$400 each) family rooms furniture including couch, love seat and 3 tables (\$200.00) curio cabinet (\$50) 5 televisions (\$200) 2 DVD players (\$25) computer (\$100) printer (\$25) monitor (\$25) dining room set (\$25) aquarium (\$100) patio furniture (\$50) camcorder (\$25) lap top computer (\$75) digital camera (\$25) portable DVD player (\$10)			
Books, Pictures and Other Art Objects; Collectibles Location: 100 Pike Street, Cincinnati OH  Misc CD's and DVD's (\$150)  Wolf pictures (\$25)  Mirror (\$10)  Barry Larkin signed ball and bat (\$100)	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	285.00	285.00
Wearing Apparel Location: 100 Pike Street, Cincinnati OH Man's and woman's clothing	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	200.00	200.00

<sup>1</sup> continuation sheets attached to Schedule of Property Claimed as Exempt

In re	Michael Ray	Baker,
	Lori Kathrvn	Baker

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Furs and Jewelry Location: 100 Pike Street, Cincinnati OH  wedding bands (\$150) diamond earrings (\$100) gold chain (\$25) gold/diamond heart pendant (\$75)	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	350.00	350.00
Interests in IRA, ERISA, Keogh, or Other Pension of US Bank 401(k) plan (Not property of the estate per U.S. Supreme Court	or Profit Sharing Plans Ohio Rev. Code Ann. § 2329.66(A)(10)(b) Not property of the estate per Patterson v. Schumate	1,500.00	1,500.00
Alimony, Maintenance, Support, and Property Sett Michael Meyer owes back due child support	l <u>ements</u> Ohio Rev. Code Ann. § 2329.66(A)(11)	22,656.49	22,656.49
Other Contingent and Unliquidated Claims of Ever Lawsuit against Sandra Thornton for medical bills resulting from car accident	<u>y Nature</u> Ohio Rev. Code Ann. § 2329.66(A)(12)(c)	100%	2,525.00
Automobiles, Trucks, Trailers, and Other Vehicles 1997 Chevy Blazer	Ohio Rev. Code Ann. § 2329.66(A)(2)	1,450.00	1,450.00
2007 Chevy Impala	Ohio Rev. Code Ann. § 2329.66(A)(2)	5,000.00	6,200.00

In re	Michael Ray Baker
	Lori Kathryn Baker

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	1 -	_				_ 1		
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	W J	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	COZH-ZGUZ	1-05-c	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxxxxx9761			Opened 7/01/08 Last Active 7/31/09	Т	Ă T E			
American General Finan 641 Northland Blvd Cincinnati, OH 45240		J	Non-Purchase Money Security 1997 Chevy Blazer		D			
			Value \$ 1,450.00				2,884.00	1,434.00
Account No. xxxxxxxxx8242  U.S. Bank Attention: Bankruptcy Department 6750 Miller Road Brecksville, OH 44141		J	Opened 1/01/07 Last Active 4/24/09  First Mortgage  100 Pike Street Cincinnati, OH 45215					
			Value \$ 132,000.00	1			118,922.00	0.00
Account No. xxxxxxxxx8243  U.S. Bank Attention: Bankruptcy Department 6750 Miller Road Brecksville, OH 44141		J	Opened 1/01/07 Last Active 1/30/09 Second Mortgage 100 Pike Street Cincinnati, OH 45215  Value \$ 132,000.00				30,688.00	17,610.00
Account No. xxxxxxxxxxxxx9001			Opened 4/01/08 Last Active 7/31/09					
Wells Fargo Po Box 60510 Los Angeles, CA 90060		J	Purchase Money Security 2007 Chevy Impala					
			Value \$ 6,200.00			_	14,770.00	8,570.00
continuation sheets attached			(Total of t	Subt his p		)	167,264.00	27,614.00
			(Report on Summary of So		otal ules	)	167,264.00	27,614.00

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In	re

Michael Ray Baker, Lori Kathryn Baker

**Debtors** 

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or

0 continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re	Michael Ray Baker, Lori Kathryn Baker		C.	ase No	
_		Debtors	_,		

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No.	C O D E B T O R	Hu H V C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	DZ1-QD-DAFHD	I I	U T F	AMOUNT OF CLAIM
A-Absolute Heat & Air c/o R & D Call Center POB 143 Eaton, OH 45320		J	A/C - Furnace		D	,	x	920.00
Account No. xxxxxxxxxx6163  Accel Credit 10079 Springfield Cincinnati, OH 45215	-	н	Med1 02 Reconstructive Ortho					238.00
Account No. xxx0114  Ais Services 50 California St Ste 150 San Francisco, CA 94111	-	н	01 Check N Go					337.00
Account No. xx0046  Aqua Finance Inc 1 Corporate Dr Wausau, WI 54401	-	н	Opened 1/01/06 Last Active 9/02/08 CheckCreditOrLineOfCredit					3,000.00
_6 continuation sheets attached	_		Total of t	Subt			)	4,495.00

In re	Michael Ray Baker,	Case No.
	Lori Kathryn Baker	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Č	Ü	D	
MAILING ADDRESS	CODEBTOR	н		CONT	U N L	D I S P	
INCLUDING ZIP CODE,	I E	w	DATE CLAIM WAS INCURRED AND	11	ΙQ	I P	
AND ACCOUNT NUMBER	Ī	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	Ü	U T E	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subject to setory, so state.	N G E N T	Ď	D	
Account No. xxxxxxxxxxxx6864	T	H	Opened 6/01/04 Last Active 7/07/09	H	D A T E		
	1		CreditCard		D		
Aspire/cb&t						Ī	1
Po Box 105555		J					
Atlanta, GA 30348							
Atlanta, GA 30340							
							050.00
							356.00
Account No. xxxx6909			Opened 3/01/09	П		Г	
	1		CollectionAttorney Capital Management				
Baystate Gas-brockton			Ventures				
Po Box 67015		J					
Harrisburg, PA 17106							
J							
							77.00
	┖			╄	▙	L	
Account No. xxxx1423	_		9/26/2008				
			Medical services				
Beacon Orthopedics							
c/o Escallate, LLC		J					
5200 Stoneham Rd., Ste. 200							
North Canton, OH 44720							
							66.59
Account No. xxxxxx6876	╁	┢	6/12/08	+	$\vdash$	┢	
Account No. AAAAAOOTO	1		Medical services				
Butley County Medical Contar			inicalidal 3cl vioc3				
Butler County Medical Center		J					
225 Pictoria Drive		"					
Suite 800							
Cincinnati, OH 45246							4 540 70
							1,548.76
Account No. xxxxxxxx3403			Opened 2/01/05 Last Active 7/07/09	Т	П	Г	
	1		CreditCard				
Capital 1 Bank							
Attn: C/O TSYS Debt Management		J					
Po Box 5155	1	1					
Norcross, GA 30091							
·	1						338.00
	<u></u>				上	Ļ	
Sheet no. <u>1</u> of <u>6</u> sheets attached to Schedule of				Subt			2,386.35
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	

In re	Michael Ray Baker,	Case No.	
	Lori Kathryn Baker		

Medical services    J			_					
AND ACCOUNT NUMBER (See instructions above.)  Account No. xxx88555  Cincinnati Childrens Hospital POB 630823 Cincinnati, OH 45263  Dir/bond Coll Por Box 498609 Cincinnati, OH 45249  Dive Energy PO Box 93001084 Louisville, KY 40290  Dive Collection Attorney Medical Laboratory  Ficc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Cincinnati, ON 45249  Cincinnati,	MAILING ADDRESS	CODE	н		CONT	UNLI	S	
Cincinnati Childrens Hospital POB 630823 Cincinnati, OH 45263  Account No. xxx4095  Dr/bond Coll Po Box 498699 Cincinnati, OH 45249  Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	AND ACCOUNT NUMBER	B T O R	J	CONSIDERATION FOR CLAIM. IF CLAIM	1	lı.	E	AMOUNT OF CLAIM
Cincinnati Childrens Hospital PDB 630823 Cincinnati, OH 45263  Account No. xxx4095  Dr/bond Coll Po Box 498609 Cincinnati, OH 45249  Duke Energy PO Box 9001084 Louisville, KY 40290  Account No. xxxxxx7238  Account No. xxxx2154  First Premier Bank Po Box 5524 Sloux Falls, SD 57117  Sheet no. 2_ of 6_ sheets attached to Schedule of Schedule o	Account No. xxx6855				Ť	TE		
Dr/bond Coll Pro Box 498609 Cincinnati, OH 45249  Account No. xxxxxxx7238  Duke Energy PO Box 9001084 Louisville, KY 40290  Account No. xxxx2154  Ffce-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Account No. xxxxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  CollectionAttorney Cincinnati Head Neck Inc  96.00  96.00  1,425.86  CollectionAttorney Medical Laboratory  Popened 6/01/08 CreditCard  Opened 6/01/05 Last Active 8/31/08 CreditCard  631.00  Sheet no. 2_ of 6_ sheets attached to Schedule of	Cincinnati Childrens Hospital POB 630823 Cincinnati, OH 45263		J	Medical services				287.51
Dr/bond Coll Po Box 498609 Cincinnati, OH 45249         H         H         96.00           Account No. xxxxxxx7238         J         2009 Utility services         Utility services         J         1,425.86           Duke Energy PO Box 9001084 Louisville, KY 40290         Depende 6/01/08 CollectionAttorney Medical Laboratory         1,425.86           Account No. xxxx2154         CollectionAttorney Medical Laboratory         1,425.86           Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220         21.00           Account No. xxxxxxxxxxxx1850         Terefit Card         21.00           First Premier Bank Po Box 5524 Sioux Falls, SD 57117         Opened 6/01/05 Last Active 8/31/08 CreditCard         631.00           Sheet no. 2_ of 6_ sheets attached to Schedule of         Subtotal         2 461.37	Account No. xxx4095							
Account No. xxxxxx7238  Duke Energy PO Box 9001084 Louisville, KY 40290  Account No. xxx2154  Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Account No. xxxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Sheet no. 2_ of 6_ sheets attached to Schedule of  Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	Dr/bond Coll Po Box 498609 Cincinnati, OH 45249		н	CollectionAttorney Cincinnati Head Neck Inc				
Duke Energy PO Box 9001084 Louisville, KY 40290  Account No. xxx2154  Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx								96.00
Duke Energy PO Box 9001084 Louisville, KY 40290  Account No. xxxx2154  Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Account No. xxxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Sheet no. 2 of 6 sheets attached to Schedule of  J Dened 6/01/08 CollectionAttorney Medical Laboratory  CollectionAttorney Medical Laboratory  Popend 6/01/05 Last Active 8/31/08 CreditCard  CreditCard  Subtotal  2 461.37	Account No. xxxxxx7238							
Account No. xxx2154  Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Account No. xxxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Sheet no. 2_ of 6_ sheets attached to Schedule of  Opened 6/01/08 CollectionAttorney Medical Laboratory  4  CollectionAttorney Medical Laboratory  631.00	Duke Energy PO Box 9001084 Louisville, KY 40290		J	ounty services				
Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Account No. xxxxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Sheet no2_ of _6_ sheets attached to Schedule of  CollectionAttorney Medical Laboratory  H  CollectionAttorney Medical Laboratory  21.00  21.00  21.00  Special Sheet statached to Schedule of Subtotal								1,425.86
Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220  Account No. xxxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Sheet no2_ of _6_ sheets attached to Schedule of  H  Opened 6/01/05 Last Active 8/31/08 CreditCard  H  Gallon  Subtotal  2461.37	Account No. xxx2154							
Account No. xxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Sheet no. 2 of 6 sheets attached to Schedule of  Opened 6/01/05 Last Active 8/31/08 CreditCard  631.00	Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220		Н	Concentration in medical Eusperatory				
First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Sheet no. 2 of 6 sheets attached to Schedule of  Subtotal  2.461.37								21.00
Sheet no. 2 of 6 sheets attached to Schedule of Subtotal 2.461.37	Account No. xxxxxxxxxxxx1850  First Premier Bank Po Box 5524 Sioux Falls, SD 57117		Н					
2.461.37								631.00
								2,461.37

In re	Michael Ray Baker,	C	ase No
	Lori Kathryn Baker	_	

				_	_		
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CO	U	D	
MAILING ADDRESS	O D E B T	н	DATE CLAIM WAS INCURRED AND	Ň	ZL-	S	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	lı I	Q	S P U T E	A COLDET OF GLADA
AND ACCOUNT NUMBER (See instructions above.)	0	C	IS SUBJECT TO SETOFF, SO STATE.	N G	Q D _	E	AMOUNT OF CLAIM
(See instructions above.)	R	)		ZGWZ	D A	D	
Account No. xxxxxxxxxxxx5164			Opened 10/01/07 Last Active 8/31/08	Т	D A T E		
			CreditCard		D		
First Premier Bank							
Po Box 5524		Н					
Sioux Falls, SD 57117							
							608.00
Account No. xxxxxxxx2660			Opened 2/01/07 Last Active 8/31/09				
			ChargeAccount				
GEMB / HH Gregg							
Attention: Bankruptcy		J					
Po Box 103106							
Roswell, GA 30076							
							900.00
Account No. xxxxxxxxxxxx3618			Opened 3/01/09				
			CollectionAttorney Kenwood Pediatric Assoc				
Gla Collection Co Inc			-				
2630 Gleeson Ln		J					
Louisville, KY 40299							
							190.00
Account No. xxxxxxxxxxxx0814			Opened 9/01/07 Last Active 4/21/08				
			CollectionAttorney Kentucky Diagnostic Ctr-Na				
Gla Collection Co Inc							
2630 Gleeson Ln		Н					
Louisville, KY 40299							
							133.00
Account No. xxxxxxxxxxx3981			Opened 11/01/02 Last Active 3/14/09				
			CreditCard				
Hsbc Bank							
Attn: Bankruptcy		J					
Po Box 5253							
Carol Stream, IL 60197							
							857.00
Sheet no. <b>3</b> of <b>6</b> sheets attached to Schedule of			S	ubt	otal	l	
Creditors Holding Unsecured Nonpriority Claims			(Total of th	nis į	pag	e)	2,688.00

In re	Michael Ray Baker,	Case No.
	Lori Kathryn Baker	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	TA I	(-)	UZU-GD-DAF	I - I	AMOUNT OF CLAIM
Account No. xxxxxxxx1989			2/24/07		Т	T E D		
Humana 300 North Madison Street Green Bay, WI 54301		J	Medical services			D		1,525.95
Account No. xxx4330  Mercy Anderson Ambulatory Surgery 7520 State Road Cincinnati, OH 45255		J	2006 Medical services					330.00
Account No. xxxxxxxxxxxx3140  Merrick Bank Po Box 5000 Draper, UT 84020		J	Opened 12/01/04 Last Active 7/07/09 CreditCard					1,234.00
Account No. xxxxxxxxxxx4274  Nelnet Attn: Claims Po Box 17460 Denver, CO 80217	-	н	Opened 7/01/06 Last Active 8/17/09 Educational					10,120.00
Account No. xxxxxxxxxxx4174  Nelnet Attn: Claims Po Box 17460 Denver, CO 80217		н	Opened 7/01/06 Last Active 8/17/09 Educational					7,802.00
Sheet no. <u>4</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(To	Sotal of th		tota pag		21,011.95

In re	Michael Ray Baker,	Case No	
	Lori Kathryn Baker		

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	С	U	D	
MAILING ADDRESS	ODEBTO	н		O N T	N L I Q U	S	3
INCLUDING ZIP CODE,	B	w	DATE CLAIM WAS INCURRED AND	ΙŢ	Ι'n	U T	ا ن
AND ACCOUNT NUMBER	T	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	11	1 =	AMOUNT OF CLAIM
(See instructions above.)	R	С	is sobtler to seron, so strike.	N G E N T	ΙĎ		j
Account No. xxx1848			Med1 02 Anes Assoc Of Cincinnati	٦	D A T E		
				L	D		
Pellettieri							
991 Oak Creek Dr		Н					
Lombard, IL 60148							
							112.00
				_	╄	╄	112.00
Account No. xx9712			Opened 3/01/07 Last Active 11/15/08				
			InstallmentSalesContract				
Preferred Credit Inc							
Po Box 1679		J					
St Cloud, MN 56302							
							1,774.00
Account No. xxxxxxx9554			Opened 2/01/08	+	╁	t	
ARRAMANOUT			FactoringCompanyAccount Mercy Hospital N	1#			
Dramium Accet Becayery			Airy	"			
Premium Asset Recovery		J	/···· <b>,</b>				
Parc Po Box 1810		٦					
Warren, MI 48090							
							95.00
Account No. xxxxxxx9559			Opened 2/01/08				
			FactoringCompanyAccount Mercy Hospital				
Premium Asset Recovery			Fairfield				
Parc		J					
Po Box 1810							
Warren, MI 48090							
							70.00
Account No. xxx8243			Opened 11/01/06	+	+	t	
			CollectionAttorney Mercy Health Fairfield				
Rossman & Co							
3592 Corporate Dr Ste 10		J					
Columbus, OH 43231		ĺ					
301dill303, 311 70231							
							90.00
							90.00
Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of				Sub	tota	al	2 4 4 4 00
Creditors Holding Unsecured Nonpriority Claims			(Total o	this	pa	ge)	2,141.00

In re	Michael Ray Baker,	Case No.
	Lori Kathryn Baker	

	_	_		_		_	
CREDITOR'S NAME,		Hu	sband, Wife, Joint, or Community	18	U	DISPUTED	
MAILING ADDRESS	Ĭ	Н	DATE OF A NAME OF THE PARTY OF	Ň	Ë	s	
INCLUDING ZIP CODE,	E	W	DATE CLAIM WAS INCURRED AND	H	0	۱۲ اا	
AND ACCOUNT NUMBER	Ţ	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	Ũ	Ť	AMOUNT OF CLAIM
(See instructions above.)	CODEBTOR	С	is subject to seture, so state.	COXHLXGEX	b	b	
	╁	╁	0 144/04/00	- N T	UNLIQUIDATED		
Account No. xxxx0246			Opened 11/01/08	1'	Ė		
			ReturnedCheck Quasar Corporate Services	$\vdash$	D	_	1
Security Check Llc							
2612 Jackson Ave W		Н				X	
Oxford, MS 38655							
Oxioru, M3 30033							
							480.00
	╀	╀	0 144/04/05 1 4 5 4 5 6 6 6 6 6	+	H	┝	
Account No. xxxxxxxx884A			Opened 11/01/05 Last Active 3/16/09				
			ChargeAccount				
Seventh Ave							
Po Box 2804		J					
Monroe, WI 53566							
Wolfide, WI 55500							
							430.00
A (N)	┢	┢	On an ad 7/04/04   a ad A adia a 7/04/00	+	H	┢	
Account No. xxxxxx2541	1		Opened 7/01/04 Last Active 7/31/09				
			Educational				
Us Dept Of Education							
Attn: Borrowers Service Dept		J					
Po Box 5609							
Greenville, TX 75403							
Greenville, 1x 75405							
							5,211.00
Account No.	╅			+		H	
Account No.	4						
Account No.				Т			
	1						
		1				1	
				上			
Sheet no. 6 of 6 sheets attached to Schedule of			:	Subt	ota	ıl	
Creditors Holding Unsecured Nonpriority Claims							6,121.00
created from Charles from the Charles			(10th)				
				T	ota	ıl	
			(Report on Summary of So	chec	lule	es)	41,304.67

In re	Michael Ray Baker,	Case No.
	Lori Kathryn Baker	
-		Debtors

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. B6H (Official Form 6H) (12/07)

In re	Michael Ray Baker,		Case No.
_	Lori Kathryn Baker	,	
		Debtors	
		SCHEDULE H - CODEBTORS	

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

In 40	Michael Ray Baker		Cosa No	
In re	Lori Kathryn Baker		Case No.	
		- · //	_	

Debtor(s)

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPEN	DENTS OF DEBTOR .	AND SPOUSE		
Married	RELATIONSHIP(S): Son Daughter	Son			
<b>Employment:</b>	DEBTOR		SPOUSE		
Occupation	Customer Service	Former	Mortgage Closer		
Name of Employer	U.S. Bank	Unemp			
How long employed	7 years	Unemp	loyed since 8/09		
Address of Employer	5065 Wooster Pike Cincinnati, OH 45226				
INCOME: (Estimate of average	ge or projected monthly income at time case filed)		DEBTOR		SPOUSE
1. Monthly gross wages, salary	y, and commissions (Prorate if not paid monthly)		\$ <b>2,319.78</b>	\$	0.00
2. Estimate monthly overtime			\$ 0.00	\$	0.00
3. SUBTOTAL			\$\$	\$	0.00
4. LESS PAYROLL DEDUCT a. Payroll taxes and socia			\$ <b>427.91</b>	\$	0.00
b. Insurance	ar security		\$ 603.82	\$ <del></del>	0.00
c. Union dues			\$ 0.00	\$ <del></del>	0.00
d. Other (Specify)	See Detailed Income Attachment		\$ 98.20	\$	0.00
5. SUBTOTAL OF PAYROLI	L DEDUCTIONS		\$1,129.93	\$	0.00
6. TOTAL NET MONTHLY	ГАКЕ НОМЕ РАҮ		\$1,189.85	\$	0.00
	tion of business or profession or farm (Attach detail	led statement)	\$	\$	0.00
8. Income from real property			\$ 0.00	\$	0.00
9. Interest and dividends			\$ 0.00	\$	0.00
dependents listed above	support payments payable to the debtor for the deb	tor's use or that of	\$	\$	0.00
11. Social security or governm (Specify):	ient assistance		\$ 0.00	\$	0.00
(Specify).			\$ 0.00	\$	0.00
12. Pension or retirement inco	me		\$ 0.00	\$	0.00
13. Other monthly income					
(Specify): Unemplo	yment Compensation (net)		\$0.00	\$	1,793.98
			\$	\$	0.00
14. SUBTOTAL OF LINES 7	THROUGH 13		\$	\$	1,793.98
15. AVERAGE MONTHLY I	NCOME (Add amounts shown on lines 6 and 14)		\$1,189.85	\$	1,793.98
16. COMBINED AVERAGE	MONTHLY INCOME: (Combine column totals fr	om line 15)	\$	2,983	.83

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor/wife will continue to look for new employment - the market for mortgage closers is and is likely to remain tight

	Michael Ray Baker		
In re	Lori Kathryn Baker	Case No.	

Debtor(s)

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Detailed Income Attachment

# Other Payroll Deductions:

401(k) loan	\$ 20.70	\$ 0.00
401(k) loan	\$ 34.89	\$ 0.00
401(k) contribution	\$ 42.61	\$ 0.00
Total Other Payroll Deductions	\$ 98.20	\$ 0.00

In re	Michael Ray Baker Lori Kathryn Baker		Case No.	
		Debtor(s)		

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

$\square$ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,150.00
a. Are real estate taxes included? Yes No _X_		
b. Is property insurance included? Yes No X		
2. Utilities: a. Electricity and heating fuel	\$	200.00
b. Water and sewer	\$	33.00
c. Telephone	\$	0.00
d. Other See Detailed Expense Attachment	\$	100.00
3. Home maintenance (repairs and upkeep)	\$	50.00
4. Food	\$	440.00
5. Clothing	\$	75.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	100.00
8. Transportation (not including car payments)	\$	175.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	50.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	100.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the	·	
plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other	\$	0.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	2,473.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
None		
20. STATEMENT OF MONTHLY NET INCOME	-	
a. Average monthly income from Line 15 of Schedule I	\$	2,983.83
b. Average monthly expenses from Line 18 above	\$ <del></del>	2,473.00
c. Monthly net income (a. minus b.)	\$ 	510.83
	Ψ	

In re	Michael Ray Baker Lori Kathryn Baker		Case No.	
		Debtor(s)		

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

# **Detailed Expense Attachment**

Other 1	Utility	Expend	itures:
---------	---------	--------	---------

Cell phone	\$ 25.00
Cable TV and internet	\$ 75.00
Total Other Utility Expenditures	 100.00

# **United States Bankruptcy Court** Southern District of Ohio

In re	Michael Ray Baker Lori Kathryn Baker			Case No.	
			Debtor(s)	Chapter	13
	DECLARATION	ON CONCERN	ING DEBTOR	R'S SCHEDULI	ES
	DECLARATION UN	NDER PENALTY (	OF PERJURY BY	INDIVIDUAL DEF	BTOR
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of				
Date	December 21, 2009	Signature	/s/ Michael Ray Bak Michael Ray Bak Debtor		
Date	December 21, 2009	Signature	/s/ Lori Kathryn I	Baker	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Lori Kathryn Baker Joint Debtor

# United States Bankruptcy Court Southern District of Ohio

In re	Michael Ray Baker Lori Kathryn Baker		Case No.	
		Debtor(s)	Chapter	13

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

# 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\$25,009.08	2009 YTD: Husband U.S. Bank
\$68,563.00	2008: Both Employment Income
\$72,894.00	2007: Both Employment Income
\$28,335.61	2009 YTD: Wife Taylor, Bean & Whitaker - through 8/7/2009

SOURCE

AMOUNT

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$4,610.00 August 2009 through present - \$461 per week unemployment compensation

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
Mike and Lori Baker v.
Sandra Thornton
Case No. 09cv32957

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION Hamilton County Small STATUS OR DISPOSITION

Car Accident Hamilto

Claims Court

Lawsuit filed 11/10/09

Ciairis Co

U.S. Bank v. Michael Baker

Foreclosure

**Hamilton County Court of** 

Suit filed 11/30/09

A 0911263 Commom Pleas

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

## 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER American General Finan 641 Northland Blvd Cincinnati. OH 45240 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN December 19, 2009

DESCRIPTION AND VALUE OF PROPERTY

1997 Chevy Blazer \$1,450.00

## 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

## 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Neal J. Weill, Attorney at Law, LLC 250 East Fifth Street Suite 1526

9/11

\$476.00

Suite 1526 Cincinnati, OH 45202

Institute for Financial Literacy 9/8/09

\$50.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

RANSFER(S) IN PROPERTY

## 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

## 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

U.S. Bank Lockland NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY Mike and Lori Baker

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

Passports and Social Security Cards

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

## 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

## 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

## 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

**ENVIRONMENTAL** 

LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

#### DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

# NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

## 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

## 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

## 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

## 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

## NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

## 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	December 21, 2009	Signature	/s/ Michael Ray Baker	
			Michael Ray Baker	
			Debtor	
Date	December 21, 2009	Signature	/s/ Lori Kathryn Baker	
			Lori Kathryn Baker	
			Joint Debtor	

 $Penalty\ for\ making\ a\ false\ statement:\ Fine\ of\ up\ to\ \$500,000\ or\ imprisonment\ for\ up\ to\ 5\ years,\ or\ both.\ 18\ U.S.C.\ \S\$\ 152\ and\ 3571$ 

# **LBR Form 2016-1(b)**

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re:		Case No.
Michael Ray Baker Lori Kathryn Baker		Chapter 13
	Debtor(s)	Judge

# DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

#### I. **Disclosure**

1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 3,000.00
	Prior to the filing of this statement I have received \$ 476.00
	Balance Due \$ <b>2,524.00</b>
2.	\$
3.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify):
4.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify):
5.	■ I have not agreed to share the above-disclosed compensation with any other persons unless they are members and/or associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

# **Application**

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
  - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what a. chapter, to file a petition in bankruptcy;
  - Preparation and filing of any petition, schedules, statement of affairs and amendments thereto that may be required; b.
  - Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required; c.
  - d. Preparation and filing of payroll orders and amended payroll orders;
  - e. Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof;
  - f. Filing of address changes;
  - Routine phone calls and questions; g.
  - Review of claims: h.

- i. Review of notice of intention to pay claims;
- Preparation and filing of objections to non-real estate and non-tax claims; j.
- Preparation and filing of first motion to suspend or reduce payments; k.
- 1. Preparation and filing of debtor's certification regarding issuance of discharge order; and
- Any other duty as required by local decision or policy. m.

As set forth in the Local Rules

By agreement with the debtor(s), the above-disclosed fee does not include the following services: 7. All items not included pursuant to the local rules

December 21, 2009	/s/ Neal J. Weill, Esq
Date	Neal J. Weill, Esq.

Date

Signature of Attorney

- Ohio Bar No. 0016575 Neal J. Weill, Attorney at Law, LLC 250 East Fifth Street **Suite 1526** Cincinnati, OH 45202 513.878.2674

Fax: 513.878.2675 nealjweill@aol.com WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

# 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

# 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

# Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

# Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

# Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

# 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy">http://www.uscourts.gov/bkforms/bankruptcy</a> forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court** Southern District of Ohio

In re	Michael Ray Baker Lori Kathryn Baker		Case No.		
	I	Debt	or(s) Chapter	13	
	CERTIFICATION OF NOTICE UNDER § 342(b) OF TH			R(S)	
	Certification	n o	f Debtor		
Code.	I (We), the debtor(s), affirm that I (we) have received and	read	I the attached notice, as required	by § 342	2(b) of the Bankruptcy
	el Ray Baker athryn Baker	X	/s/ Michael Ray Baker		December 21, 2009
Printed	Name(s) of Debtor(s)		Signature of Debtor		Date
Case N	To. (if known)	X	/s/ Lori Kathryn Baker		December 21, 2009
			Signature of Joint Debtor (if any	<b>'</b> )	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

A-Absolute Heat & Air c/o R & D Call Center POB 143 Eaton, OH 45320

Accel Credit 10079 Springfield Cincinnati, OH 45215

Ais Services 50 California St Ste 150 San Francisco, CA 94111

American General Finan 641 Northland Blvd Cincinnati, OH 45240

Aqua Finance Inc 1 Corporate Dr Wausau, WI 54401

Aspire/cb&t Po Box 105555 Atlanta, GA 30348

Baystate Gas-brockton Po Box 67015 Harrisburg, PA 17106

Beacon Orthopedics c/o Escallate, LLC 5200 Stoneham Rd., Ste. 200 North Canton, OH 44720

Butler County Medical Center 225 Pictoria Drive Suite 800 Cincinnati, OH 45246

Capital 1 Bank Attn: C/O TSYS Debt Management Po Box 5155 Norcross, GA 30091

Cavalry POB 27288 Tempe, AZ 85285

Cincinnati Childrens Hospital POB 630823 Cincinnati, OH 45263

Dr/bond Coll Po Box 498609 Cincinnati, OH 45249 Duke Energy PO Box 9001084 Louisville, KY 40290

Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220

First Franklin 150 Allegheny Center Mall Pittsburgh, PA 15212

First Premier Bank Po Box 5524 Sioux Falls, SD 57117

GEMB / HH Gregg Attention: Bankruptcy Po Box 103106 Roswell, GA 30076

Gla Collection Co Inc 2630 Gleeson Ln Louisville, KY 40299

Home Loan Services 150 Allegheny Center Mall IDC-24-060 Pittsburgh, PA 15212

Hsbc Bank Attn: Bankruptcy Po Box 5253 Carol Stream, IL 60197

Humana 300 North Madison Street Green Bay, WI 54301

Lerner Sampson & Rothfuss 120 East Fourth Street 8th Floor Cincinnati, OH 45202

Mercantile Ajustment Bureau PO Box 9016 Buffalo, NY 14231

Mercy Anderson Ambulatory Surgery 7520 State Road Cincinnati, OH 45255

Merrick Bank Po Box 5000 Draper, UT 84020 NARS POB 701 Chesterfield, MO 63006

Nelnet Attn: Claims Po Box 17460 Denver, CO 80217

Pellettieri 991 Oak Creek Dr Lombard, IL 60148

Preferred Credit Inc Po Box 1679 St Cloud, MN 56302

Premium Asset Recovery Parc Po Box 1810 Warren, MI 48090

Rossman & Co 3592 Corporate Dr Ste 10 Columbus, OH 43231

Security Check Llc 2612 Jackson Ave W Oxford, MS 38655

Seventh Ave Po Box 2804 Monroe, WI 53566

U.S. Bank Attention: Bankruptcy Department 6750 Miller Road Brecksville, OH 44141

Us Dept Of Education Attn: Borrowers Service Dept Po Box 5609 Greenville, TX 75403

Wells Fargo Po Box 60510 Los Angeles, CA 90060

# B22C (Official Form 22C) (Chapter 13) (01/08)

	Michael Ray Baker	According to the calculations required by this statement:
In re	Lori Kathryn Baker	■ The applicable commitment period is 3 years.
	Debtor(s)	☐ The applicable commitment period is 5 years.
Case N	Jumber:	- □ Disposable income is determined under § 1325(b)(3).
	(If known)	■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

# CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Par	rt I.	REPORT OF INC	COME						
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.									
	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") All figures must reflect average monthly income received from all sources, derived during the six						for Lines 2-10.			
							Column A		Column B	
	calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.						Debtor's Income		Spouse's Income	
2	Gross wages, salary, tips, bonuses, overtime, commissions.						2,016.19	\$	1,465.25	
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.									
			Debtor		Spouse					
	a. Gross receipts	\$	0.00		0.00					
	b. Ordinary and necessary business expenses c. Business income	\$	0.00 btract Line b from	\$	0.00	\$	0.00	d.	0.00	
4	the appropriate column(s) of Line 4. Do not enter part of the operating expenses entered on Line bases.  a. Gross receipts		a deduction in Par Debtor	t IV.	Spouse 0.00					
	b. Ordinary and necessary operating expenses	\$	0.00	\$	0.00					
	c. Rent and other real property income	S	ubtract Line b from	Line a		\$	0.00	\$	0.00	
5	Interest, dividends, and royalties.					\$	0.00	\$	0.00	
6	Pension and retirement income.					\$	0.00	\$	0.00	
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.					\$	0.00	\$	0.00	
8	Unemployment compensation. Enter the amount in However, if you contend that unemployment complement under the Social Security Act, do not list the or B, but instead state the amount in the space below.	ens ie ai	ation received by yo	ou or yo	our spouse was a					
	Unemployment compensation claimed to be a benefit under the Social Security Act Debto	r \$	<b>0.00</b> Sp	ouse \$	1,075.67	\$	0.00	\$	0.00	

	<b>Income from all other sources.</b> Specify source and amount. If necessary, list addition a separate page. Total and enter on Line 9. <b>Do not include alimony or separate</b>	nal sources			
	maintenance payments paid by your spouse, but include all other payments of alin				
9	<b>separate maintenance. Do not include</b> any benefits received under the Social Securi payments received as a victim of a war crime, crime against humanity, or as a victim of				
	international or domestic terrorism.				
	Debtor Spot	ıse			
	a.		\$ 0	.00 \$	0.00
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines	2 through 9	Ψ		
10	in Column B. Enter the total(s).		\$ 2,016	.19 \$	1,465.25
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column the total. If Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, add Line 10, Column B has not been completed, and Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed, enter the amount from Line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Column B has not been completed and the line 10, Colum		\$		3,481.44
	Part II. CALCULATION OF § 1325(b)(4) COMMI	TMENT I	PERIOD		
12	Enter the amount from Line 11			\$	3,481.44
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, A calculation of the commitment period under § 1325(b)(4) does not require inclusion o enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT the household expenses of you or your dependents and specify, in the lines below, the income (such as payment of the spouse's tax liability or the spouse's support of person debtor's dependents) and the amount of income devoted to each purpose. If necessary on a separate page. If the conditions for entering this adjustment do not apply, enter z	f the income paid on a re basis for exc s other than , list addition	of your spouse, gular basis for cluding this the debtor or the		
	b. \$				
	[c.   \$				
	Total and enter on Line 13			\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.			\$	3,481.44
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Lienter the result.	ne 14 by the	number 12 and	\$	41,777.28
16	<b>Applicable median family income.</b> Enter the median family income for applicable state information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the			3	
	a. Enter debtor's state of residence: OH b. Enter debtor's househo	ld size:	4	\$	73,301.00
	Application of § 1325(b)(4). Check the applicable box and proceed as directed.				
17	■ The amount on Line 15 is less than the amount on Line 16. Check the box for "top of page 1 of this statement and continue with this statement.	The applicab	ole commitment	period i	s 3 years" at the
	☐ The amount on Line 15 is not less than the amount on Line 16. Check the box f at the top of page 1 of this statement and continue with this statement.	or "The appl	icable commitm	ent peri	iod is 5 years"
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING	DISPOSAB	LE INCOME	<b>.</b>	
18	Enter the amount from Line 11.			\$	3,481.44
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, e any income listed in Line 10, Column B that was NOT paid on a regular basis for the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the payment of the spouse's tax liability or the spouse's support of persons other than the dependents) and the amount of income devoted to each purpose. If necessary, list additions separate page. If the conditions for entering this adjustment do not apply, enter zero.    a.	household ex te Column B lebtor or the	xpenses of the income(such as debtor's		
	c. \$				
	Total and enter on Line 19.			\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter	the result.		\$	3,481.44

21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 an enter the result.						\$	41,777.28
22	Applic	able median family incon	ne. Enter the amount from	m Lin	e 16.		\$	73,301.00
23	☐ The 132 ■ The	pplication of § 1325(b)(3). Check the applicable box and proceed as directed.  The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is dete 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.  The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete P						nined under §
		Part IV. C.	ALCULATION (	)F I	DEDUCTIONS FR	OM INCOME		<u>^</u>
		Subpart A: D	eductions under Star	ndar	ds of the Internal Reve	nue Service (IRS)		
24A	Enter in applica	al Standards: food, appar n Line 24A the "Total" am able household size. (This ptcy court.)	ount from IRS National	Stand	ards for Allowable Living	Expenses for the	\$	
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.							
	Household members under 65 years of age			Household members 65 years of age or older				
	a1.	Allowance per member		a2.	Allowance per member			
	b1.	Number of members		b2.	Number of members			
	c1.	Subtotal		c2.	Subtotal		\$	
25A	Utilitie	Standards: housing and uses Standards; non-mortgage le at www.usdoj.gov/ust/ o	expenses for the application	able c	ounty and household size.		\$	
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rent Expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense  Subtract Line b from Line a.					\$		
26	25B do Standa	Standards: housing and upes not accurately computerds, enter any additional artion in the space below:	the allowance to which	you a	re entitled under the IRS H	lousing and Utilities	\$	
27A	expens regardl Check include If you of Transp Standa	Standards: transportation e allowance in this categor ess of whether you use put the number of vehicles for ed as a contribution to your checked 0, enter on Line 2 ortation. If you checked 1 rds: Transportation for the s Region. (These amounts a	y regardless of whether yolic transportation. which you pay the operations household expenses in 7A the "Public Transportor 2 or more, enter on Lapplicable number of ve	you pating of Line of tation ine 2'	expenses of operating expenses or for which the of the following of the following the	operating expenses are ore. Standards: umount from IRS Local olitan Statistical Area or	S	

27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)   1  2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.				
	a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle  1, as stated in Line 47	\$ \$			
	c. Net ownership/lease expense for Vehicle 1  Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28.	Subtract Line b from Line a.  2. Complete this Line only if you checked	\$		
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. <b>Do not enter an amount less than zero.</b>	court); enter in Line b the total of the Average ne 47; subtract Line b from Line a and enter			
	a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle  2, as stated in Line 47	\$ Subtract Line b from Line a.	\$		
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal,				
31	Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.				
32	\$				
33	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.		\$		
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. <b>Do</b>	• • • • • •	\$		
36	Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.				
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.				
38	Total Expenses Allowed under IRS Standards. Enter the total of L	ines 24 through 37.	\$		
	Subpart B: Additional Living	′ <del>-</del>			

	I			T		
	the ca		<b>Iealth Savings Account Expenses.</b> List the monthly expenses in reasonably necessary for yourself, your spouse, or your			
39	a.	Health Insurance	\$			
	b.	Disability Insurance	\$			
	c.	Health Savings Account	\$			
	Total	and enter on Line 39		\$		
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$					
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.					
41	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.					
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.					
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.					
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.			\$		
45	contri	butions in the form of cash or financial ins	ssonably necessary for you to expend each month on charitable struments to a charitable organization as defined in 26 U.S.C. § access of 15% of your gross monthly income.	\$		
46	Total	Additional Expense Deductions under §	<b>707(b).</b> Enter the total of Lines 39 through 45.	\$		

			Subpart C: Deductions for De	bt ]	Payment			
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.							
		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance		
	a.			\$ T	otal: Add Lines	□yes □no	\$	
48	moto your paym sums	or vehicle, or other property deduction 1/60th of any am nents listed in Line 47, in or in default that must be paid following chart. If necessary	nims. If any of debts listed in Line 47 are senecessary for your support or the support or ount (the "cure amount") that you must pay der to maintain possession of the property. d in order to avoid repossession or foreclosur, list additional entries on a separate page.	f you the The	ar dependents, you creditor in addit cure amount wo List and total any	ou may include in ion to the uld include any such amounts in		
	a.	Name of Creditor	Property Securing the Debt		\$	he Cure Amount		
					,	Total: Add Lines	\$	
49	prior	ity tax, child support and al	ity claims. Enter the total amount, divided imony claims, for which you were liable at s, such as those set out in Line 33.				\$	
50		Projected average month Current multiplier for you	hly Chapter 13 plan payment. our district as determined under schedules	s amo	ount in Line b, an	nd enter the		
			Office for United States Trustees. (This at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of	X				
	c.		sistrative expense of Chapter 13 case	To	otal: Multiply Li	nes a and b	\$	
51	Tota	l Deductions for Debt Pay	ment. Enter the total of Lines 47 through 5	60.			\$	
			Subpart D: Total Deductions f	ron	n Income			
52	Tota	l of all deductions from in	<b>come.</b> Enter the total of Lines 38, 46, and 5	51.			\$	
		Part V. DETER	RMINATION OF DISPOSABLE I	INC	COME UNDE	ER § 1325(b)(2)	)	
53	Tota	l current monthly income.	Enter the amount from Line 20.				\$	
54	<b>Support income.</b> Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.						\$	
55	wage		ns. Enter the monthly total of (a) all amount fied retirement plans, as specified in § 541(lespecified in § 362(b)(19).				\$	
56	Tota	l of all deductions allowed	under § 707(b)(2). Enter the amount from	Lin	ne 52.		\$	
	_							

57	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable.					
		Nature of special circumstances	Amo	ount of Expense		
	a.		\$			
	b.		\$			
	c.		\$			
			Tota	ıl: Add Lines	\$	
58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.			\$		
59	59 <b>Monthly Disposable Income Under § 1325(b)(2).</b> Subtract Line 58 from Line 53 and enter the result.			\$		
		Part VI. ADDITIONAL EXPEN	SE (	CLAIMS		

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

60

61

	Expense Description	Monthly Amount
a.		\$
b.		\$
c.		\$
d.		\$
	Total: Add Lines a, b, c and d	\$

# Part VII. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct.	(If this is a joint case, both debtor:
must sign.)	

Date: December 21, 2009 Signature: /s/ Michael Ray Baker

Michael Ray Baker (Debtor)

(Bestol)

Date: December 21, 2009 Signature /s/ Lori Kathryn Baker
Lori Kathryn Baker

(Joint Debtor, if any)

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# **Current Monthly Income Details for the Debtor**

## **Debtor Income Details:**

Income for the Period 06/01/2009 to 11/30/2009.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: US Bank

Year-to-Date Income:

Starting Year-to-Date Income: \$12,911.93 from check dated Ending Year-to-Date Income: \$25,009.08 from check dated 11/30/2009

Income for six-month period (Ending-Starting): \$12,097.15 .

Average Monthly Income: \$2,016.19.

# **Current Monthly Income Details for the Debtor's Spouse**

# **Spouse Income Details:**

Income for the Period 06/01/2009 to 11/30/2009.

# Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Taylor, Bean & Whitaker

Income by Month:

6 Months Ago:	06/2009	\$3,324.00
5 Months Ago:	07/2009	\$5,467.50
4 Months Ago:	08/2009	\$0.00
3 Months Ago:	09/2009	\$0.00
2 Months Ago:	10/2009	\$0.00
Last Month:	11/2009	\$0.00
	Average per month:	\$1,465.25

# Line 8 ssa - Unemployment compensation (Non-CMI)

Source of Income: Unemployment compensation

Income by Month:

6 Months Ago:	06/2009	\$0.00
5 Months Ago:	07/2009	\$0.00
4 Months Ago:	08/2009	\$461.00
3 Months Ago:	09/2009	\$2,305.00
2 Months Ago:	10/2009	\$1,844.00
Last Month:	11/2009	\$1,844.00
	Average per month:	\$1,075.67